

**SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES**  
**2000 PRIMARY AND GENERAL ELECTIONS**

*State of Nevada*

DONALD KAPLAN INCLINE TRUSTEE  
Candidate's Name(print) Office District (if applicable)  
630 WOODRIDGE CIRCLE INCLINE VILLAGE, NV 89451 (775) 832-6886  
Mailing address (include city and zip code) Telephone Number

**REPORT NUMBER 1 - DUE AUGUST 29, 2000**

Report Period **Began:** December 17, 1994, for an office with a six year term  
Report Period **Began:** December 21, 1996, for an office with a four year term  
Report Period **Began:** December 19, 1998, for an office with a two year term

Report Period **Ends:** August 23, 2000

Cash on hand from previous campaign (should equal the balance shown on your last disposition of unspent contributions report), if any NONE

**CONTRIBUTIONS SUMMARY**

1. Total Amount of contributions in excess of \$100	<u>634 19</u>
2. Total amount of contributions of \$100 or less	<u>0</u>
Actual number of contributions of \$100 or less <u>0</u>	
3. Interest and income earned, if any	<u>NONE</u>
4. <b>TOTAL AMOUNT OF ALL CONTRIBUTIONS</b> (add lines 1 through 3)	<u>634 19</u>

**EXPENSES SUMMARY**

5. Total amount of expenses in excess of \$100	<u>504 60</u>
6. Total amount of expenses of \$100 or less	<u>99 59</u>
7. Expense for filing fee	<u>30 00</u>
8. <b>TOTAL AMOUNT OF ALL EXPENSES</b> (add lines 5 through 7)	<u>634 19</u>

*If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.*

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 8/26/00  
Date

Donald Kaplan  
Signature of Candidate

DONALD KAPLAN 1061D TRUSTEE  
Candidate's Name (print) Office District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed of \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK ✓ IF LOAN	CHECK ✓ IF IN KIND
DONALD KAPLAN 630 WOODRIDGE CIRCLE INCLINE VILLAGE, NV 89451	JULY + AUG, 2000	634 <sup>19</sup>		

DONALD KAPLAN 1KGID TRUSTEE  
Candidate's Name (print) Office District (if applicable)

## Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	B	
Expenses related to travel	C	
Expenses related to advertising	D	604 <sup>19</sup>
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	H	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses REG FEES	J	30 <sup>00</sup>

District (if applicable)

### Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
TAHOE CRAFTS PRINTING P.O Box 549 KINGS BEACH CA 96143	ADVERTISING	8/10/00	161 <sup>40</sup>
" "	"	7/28/00	343 <sup>20</sup>
" "	"	8/20/00	75 <sup>19</sup>
HOME DEPOT 6590 S. VIRGINIA ST. RENO, NV. 89571	"	7/19/00	24 <sup>40</sup>
		TOTAL	604 <sup>19</sup>

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## CAMPAIGN EXPENSES

**REPORT PERIOD Number 1**

DONALD KAPLAN IVGID TRUSTEE

Candidate's Name (print) Office District (if applicable)

### Expenses of \$100 or Less

[illegible][illegible]

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